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Bib Data Sheet

CONFIRMATION NO. 1868

SERIAL NUMBER 10/772,137	FILING OR 371(c) DATE 02/04/2004 RULE	CLASS 600	GROUP ART UNIT 3737	ATTORNEY DOCKET NO. MAKO 2 00030
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APPLICANTS
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**** CONTINUING DATA *******
 This appln claims benefit of 60/319,924 02/04/2003 and claims benefit of 60/444,824 02/04/2003
 and claims benefit of 60/444,975 02/04/2003
 and claims benefit of 60/445,078 02/04/2003 *MS*
 and claims benefit of 60/444,989 02/04/2003
 and claims benefit of 60/444,988 02/04/2003
 and claims benefit of 60/445,002 02/04/2003
 and claims benefit of 60/445,001 02/04/2003

**** FOREIGN APPLICATIONS *******
name MS

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
**** 05/06/2004**

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>MS</i> Examiner's Signature Initials	STATE OR COUNTRY NY	SHEETS DRAWING 4	TOTAL CLAIMS 6	INDEPENDENT CLAIMS 2
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ADDRESS
027885

TITLE
Portable, low-profile integrated computer, screen and keyboard for computer surgery applications

FILING FEE RECEIVED 920	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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